PTO/SB/22 (12-04)
Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARMENT OF COMMERCE
Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PLL

FY 2005 Frees pursuant to the Connectioner & Papporariatrons &ct. 2008 &ct. 45(6).	PETITION	FOR EXTENSION OF TIME UNDER 3	Docket Number (Optional)			
Application Number 10/050,771 Filed 1/16/2002 For In-Vehicle Audio Browser System Having a Common Usability Model Art Unit 2173 Examiner Raymond J Bayer! This is a request under the provisions of 37 CFR 1.138(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriata fee below): Fee	•	FY 2005	MS1 869US			
Application Number 10/030/77 For In-Vehicle Audio Browser System Having a Common Usability Model Art Unit 2173			#lled 1/16/2002			
Art Unit 2173 Examiner Raymond J Bayeri This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee			Filed 1/10/2002			
This is a request under the provisions of 37 CFR 1.138(a) to extend the period for filling a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):	For In-Ve	Phicle Audio Browser System Having a Com	mon Usability Model	<u> </u>		
application. The requested extension and fee are as follows (check time period desired and enter the appropriats fee below): Fee Small Entity Fee	7 4 1 2 1 1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2					
One month (37 CFR 1.17(a)(1)) \$120 \$60 \$ 120.00 Two months (37 CFR 1.17(a)(2)) \$450 \$225 \$ Three months (37 CFR 1.17(a)(3)) \$1020 \$510 \$ Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$ Four months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$ Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$ Applicant daims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director has elready been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the	application.	•				
One month (37 CFR 1.17(a)(1)) \$120 \$60 \$ 120.00 Two months (37 CFR 1.17(a)(2)) \$450 \$225 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$						
Two months (37 GFR 1.17(a)(2)) \$450 \$225 \$		1				
Three months (37 CFR 1.17(a)(a)) \$1020 \$510 \$ Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$ Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$ Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent under 37 CFR 1.34. Registration_number if acting under 37 CFR 1.34. Signature Jim Patterson (509) 324-9256 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if multiple forms is to file (and by the public which is to file (and b	<u> </u>	One month (37 CFR 1.17(a)(1))		•	*	
Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$		Two months (37 CFR 1.17(a)(2))	\$450	\$225		
Five months (37 CFR 1.17(a)(5)) \$2180 \$1080 \$ Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. Registration under 37 CFR 1.34. Signature Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of information is negurited by 37 CFR 1.136(9). The intermition is required to both or return is benefit by the public which is to rice (and by the SM 15 C 12 and 37 CFR 1.11 and 1.14. This collection is attinuated to take 6 minutes to		Three months (37 CFR 1.17(a)(3))	\$1020	·		
Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent under 37 CFR 1.34. Registration Number attorney or agent under 37 CFR 1.34. Signature Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. This collection of information is required by 37 CFR 1.35(a). The information is required to be being retrieved to take 6 minutes to		Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registrative, number if acting under 37 CFR 1.34. Signature Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of intermation is required by 37 CFR 1.336(g). The intermetion is required to both or retain a benefit by the public which is to file (and by the minutes to		Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registrative, number if acting under 37 CFR 1.34. Signature Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of intermation is required by 37 CFR 1.336(g). The intermetion is required to both or retain a benefit by the public which is to file (and by the minutes to	Applicant claims small entity status. See 37 CFR 1.27.					
Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769	اسا					
The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769						
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0769 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the						
Deposit Account Number 12-0769 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 Signature Jim Patterson (509) 324-9256 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of intermediation is required by 37 CFR 1.136(a). The information is required to botton or retain a benefit by the public which is to file (and by the interest). The collection is estimated to take 6 minutes to						
Deposit Account Number WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent under 37 CFR 1.34. Registration number	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to					
I am the	Depo	IING, information on this form may become Dif	bile. Credit card inform			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. Signature Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of information is required by 37 CFR 1.136(s). The information is required to bottom or retain a benefit by the public which is to file (and by the Information is required to take 6 minutes to	Provide credit card information and authorization on PTO-2038.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. Signature Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of information is required by 37 CFR 1.136(s). The information is required to bottom or retain a benefit by the public which is to file (and by the Information is required to take 6 minutes to	I am the applicant/inventor.					
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. Signature Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which its to file (and by the INSTER INSTERIOR INSTER						
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 Signature Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection is required by 37 CFR 1.136(a). The intermetion is required to obtain or retain a benefit by the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the public which is to file (and by the INSECTION of the INSECTI	Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
Registration number if acting under 37 CFR 1.34 Signature	attorney or agent of record. Registration Number					
Signature Date Jim Patterson (509) 324-9256 Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USETTO Confidentiality). Confidentiality is control by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to	attorney or agent under 37 CFR 1.34.					
Signature Date Jim Patterson (509) 324-9256 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the INSECTION CONTINUES OF CONTINUES OF INSECTION CO		Ti Vila		May 2.	2005	
Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of information is required by 37 CFR 1.136(s). The information is required to obtain or retain a benefit by the public which is to file (and by the	-				Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which it to file (and by the		Jim Patterson		(509) 32	24-9256	
signature is required, see below. Total of forms are submitted. This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which it to file (and by the USETTO to exceed) or particular or confidentially is exceeded by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to		Typed or printed name		Teb	ephone Number	
This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the	NOTE: \$igna signature is r	itures of all the inventors or assignees of record of the en equired, see below.	tire interest or their represe	ntative(s) are required. Su	bmit muttiple forms if more than one	
LICETO to appared on prolifeston. Confidentially is equated by 95 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take o minutes to	☐ Total	al of forms are				
	LICETO to see	nant on analication. Confidentiality is constant by 95 U.	S.C. 122 and 37 CFR 1.11	and 1.14. This coulection i	S RETURNIS OF CHICA OF CHICAGO CO	

comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.